



## Application Data Sheet

### Application Information

Application number:: 10/535,509  
Filing Date:: May 18, 2005  
Application Type:: Regular  
CD-ROM or CD-R?:: None  
Number of CD Disks::  
Number of copies of CDs::  
Sequence submission?::  
Computer Readable Form No  
(CRF)?::  
Number of copies of CRF::  
Title:: USE OF CARNITINES FOR  
THE PREVENTION AND/OR  
TREATMENT OF DISORDERS  
CAUSED BY THE  
ANDROPAUSE  
Attorney Docket Number:: ARC-4865-47  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure::  
Total Drawing Sheets:: 0  
Small Entity?:: No  
Petition included?:: No  
Petition Type::  
Licensed US Govt. Agency:: No  
Contract or Grant Numbers::

### Applicant Information

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Italian

Status:: Full  
Given Name:: Aleardo  
Middle Name::  
Family Name:: KOVERECH  
Name Suffix::  
City of Residence:: Pomezia, Rome  
State or Province of Residence::  
Country of Residence:: Italy  
Street of mailing address:: c/o Sigma-Tau Industrie Farmaceutiche Riunite,  
S.p.A., Via Pontina Km 30 400  
City of mailing address:: Pomezia, Rome  
State or Province of mailing address::  
Country of mailing address:: Italy  
Postal or Zip Code of mailing address:: I-00040  
Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Italian  
Status:: Full  
Given Name:: Giorgio  
Middle Name::  
Family Name:: CAVALLINI  
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City of Residence:: Pomezia, Rome  
State or Province of Residence::  
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S.p.A., Via Pontina Km 30 400  
City of mailing address:: Pomezia, Rome  
State or Province of mailing address::  
Country of mailing address:: Italy  
Postal or Zip Code of mailing address:: I-00040  
Applicant Authority Type:: Inventor

Primary Citizenship Country:: Italian  
Status:: Full  
Given Name:: Giulio  
Middle Name::  
Family Name:: BIAGIOTTI  
Name Suffix::  
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Country of Residence:: Italy  
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City of mailing address:: Pomezia, Roma  
State or Province of mailing address::  
Country of mailing address:: Italy  
Postal or Zip Code of mailing address::

**Correspondence Information**

Correspondence Customer Number:: 23117

**Representative Information**

Representative Customer Number:: 23117

**Domestic Priority Information**

Application:: Continuity Type:: Parent Application:: Parent Filing Date::  
This application

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
DAY/MONTH/YEAR			
IT	RM2002A000620	13 December 2002	Yes
	PCT/IT2003/000757	20 November 2003	Yes

**Assignee Information**

Assignee Name:: SIGMA-TAU INDUSTRIE  
FARMACEUTICHE RIUNITE  
S.P.A.  
Street of mailing address:: Viale Shakespeare, 47  
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State or Province of mailing  
address::  
Country of mailing address:: Italy  
Postal or Zip Code of mailing  
Address:: I-00141